In accordance with Rule 3.2 of the	Trust Dood I ANNABEI	LE ROSS	acc	cept my offer
of Membership and apply to the	Trustee of the above name	d superannuation fur	nd ("the Fund") t	o become a
Member of the Fund.				
	Female X	Date of Birth	06 /0	7 / 1982
Address for Correspondence				
c/- TREVOR WISE & CO				
PO BOX 860 BONDI JUNG	CTION NSW 2022			
Home Address (If different from	above)			
11 WALLIS PARADE				
NORTH BONDI NSW 2026	<u>)</u>			
Telephone	· F:	acsimile		
Phone (02) 9130–3420		ax		
Personal Tax File Number	8 2 6	2 1	4 7	
 You may pay more tax on your super income tax assessment); and It may be more difficult to find your multiple superannuation accounts. I understand that under the terms of my dependants or, if in the opinion of would like the Trustee to know that income inc	superannuation benefit if you cha the Trust Deed, my benefit in the	nge address without notify he event of my death sh	ing your fund or to a all be paid to any o personal legal re	malgamate any one or more of oresentative. I
the proportions indicated. Person's full name	<u>Address</u>		Relationship	%
		vo /	Father	_
Michael Moss	11 Wallis Parad	V	J- a grack	45
	Norm Bordi 2	006		
Ann Ross	<u> </u>		Moiner	45
Javon Moss	//	SACA	(Bromer)	10
Declaration				
I accept the Trustee of the Fun	d will protect my interests in th	e Fund in accordance v	vith the terms of th	e Trust Deed;
l agree to be bound by the Trus	st Deed (as amended from tim	e to time);		
I accept there are no guarantee	es to the amount of benefit to v	which I shall be entitled	;	
I declare that I am eligible to be	ecome a member of the Fund;			
 I acknowledge that the beneficient 	ary details nominated herein a	are not binding on the T	rustee;	
I hereby declare that the content	nts of this Application are true	and accurate.		
Members Signature:	Imaselle from		Date:	107 1 5

Member's Rights & Benefits Statement



This statement is issued by the Trustee to provide Members with the information they need for the purpose of understanding the main features of the Fund.

This statement does not vary or replace the Trust Deed of the Fund, nor does it cover every provision in the Trust Deed. Its purpose is to summarise the main features of the Fund in simple terms.

Membership

The Principal, as defined in the Trust Deed, may nominate any person to become a Member. A nominated person accepts the offer of membership by lodging an application to the Trustee to become a Member. On acceptance of the application, the applicant becomes a Member of the category of membership nominated by the Principal on the application form.

The Trustee, however, maintains the right to refuse to admit a nominated person as a member of the Fund.

Membership may cease upon:

- full payment of the Member's benefits
- the death of the Member
- no money remaining in the Member's account.

Each Member is bound by the provisions of the trust deed.

Contributions

A Participant (a person or entity who contributes to the fund) may make "superannuation guarantee" contributions to the Fund or any other contribution in their absolute discretion.

Member's may make personal contributions to the Fund.

The Fund may accept "in-specie" contributions, transfers and roll-overs.

Contributions may be paid direct to the Administrator if the Trustee agrees to the payment.

Member's Account

Each Member will have their own account into which all contributions in respect to that Member will be credited.

The Trustee may debit from the Member's account their share of the Fund's expenses and/or capital losses as determined by the Trustee.

The Trustee shall credit the Member's account for the Member's share of Fund income and/or capital profits as determined by the Trustee.

The Trustee can create reserves out of the Fund to smooth investment returns to Members and/or to meet any taxation commitments.

Insurance

The Trustee may arrange on behalf of the Member, death, disability insurance, or any other insurance permitted under the Acts. The Member must provide the Trustee with information to enable the Trustee to take out such insurance.

The Trustee shall be responsible for determining the type, the amount, and the provider of insurance. Insurance premiums will be deducted from the Member's account.

Retirement Benefits of the Member

A benefit is payable when:

- the Member retires at or after age 65. If, however, the Member continues to work on a "part-time equivalent level" (i.e. for more than 240 hours per annum) the benefit need not be paid until the Member reaches age 75;
- the Member attains age 65 and elects to receive a benefit, even if the Member has not yet retired;
- where an Employer contributes to the Fund on behalf of a Member and the Member ceases employment with the Employer after reaching age 60.

Where the Trustee of the Fund is a constitutional corporation, the retirement benefit shall be paid as a lump sum. The member may, however, request that all or part of the benefit is paid as a pension.

Where one or more individuals act as Trustee of the Fund, the primary purpose of the Fund is the provision of old-age pensions and retirement benefits are, therefore, payable as a pension. The Member entitled to the benefit may however request that part or all of the benefit is commuted to a lump sum.

The Trustee may pay a pension from the Fund by purchasing an annuity for the Member from a Life Office.

Benefits may be paid "in-specie".

Portability & Preservation of Benefits

A Member's benefit is payable directly to the Member if it has become payable:

- on attaining age 65;
- on "retirement", which means:

the Member ceased an arrangement under which the Member was gainfully employed having attained age 55 and the Trustee is reasonably satisfied that the Member intends never to again become gainfully employed for at least ten (10) hours per week;

the Member ceased an arrangement under which the Member was gainfully employed having attained age 60.

on the Member's total and permanent disablement.

Death Benefit

A member may by notice in writing to the Trustee nominate which of the Member's dependents the Member would prefer to receive the benefit payable on the Member's death. The decision as to which of the Member's dependents receive the death benefit, or whether any part of the benefit is paid to the Member's legal personal representative, is however made by the Trustee and the Trustee is not bound by the Member nomination, unless the nomination is a Binding Death Benefit Nomination.

The amount of the benefit payable on death is the total of the Member's accumulated benefit and the proceeds of any policy of insurance payable on the Member's death. A Member may however elect that the benefit payable on the Member's death is insurance proceeds only, so that the Member's accumulated benefit is retained in the Fund for allocation to other Member's (except to the extent that the accumulated benefit represents "superannuation guarantee" contributions by employers).

Disablement Benefits

A Member is entitled to a benefit on:

- total and permanent disablement; or
- absence from work due to sickness or accident ("temporary incapacity").

The Trustee may insure the Member against permanent and total disablement or temporary incapacity. The premiums for such insurance will be debited from the Member's account.

The amount of a benefit payable on total and permanent disablement is the Member's accumulated account balance and the proceeds of any policy of insurance which become payable on total and permanent disablement.

The amount of a benefit payable on a Member's temporary incapacity is generally the amount payable under the policy of insurance.

Vesting

Certain contributions and amounts rolled-over into the Fund will be fully vested in the Member at the time they are credited to the Fund, for example:

- "superannuation guarantee" contributions
- personal contributions
- amounts designated as vested member financed benefits transferred from another fund

Where a benefit becomes payable in respect of a Member before age 65 (other than on death or disablement), the vesting scale applicable to that Member's category will apply to employer contributions other than "superannuation guarantee" contributions.

The vesting scales are as follows:

Category A: 100% vesting.

Category B: 34% vesting for one (1) year of service, 67% vesting for two (2) years of

service and 100% vesting after three (3) years of service.

Category C: 20% vesting for each year of service up to five (5) years.

Category D: 10% vesting for each year of service up to ten (10) years.

Category E: Vesting determined by the Principal.

Where a Member however retires or is otherwise paid a benefit at or after age 65, all employer contributions are treated as fully vested, unless the Member requests a reduction of the amount of the benefit.

Management & Financial Condition

The management of the Fund is the responsibility of the Trustee. The Trustee is required to formulate an investment strategy for the Fund and to invest contributions in accordance with that strategy. The Trustee may seek the assistance of an Investment Manager when determining an appropriate investment strategy and/or selecting individual assets.

The Trustee may appoint an Administrator to fulfil the administrative functions associated with operating the Fund.

After the end of each financial year, the Trustee shall provide to each Member a report which contains information on the following matters for that financial year:

- the investment strategy and investment objectives of the Fund;
- the Fund's management and financial condition;
- the Fund's investment performance, including details of the return on the Fund's investments, expenses and any fluctuations in the value of the assets of the Fund.

the super group

Exponential Nominees Superannuation Fund

Register of Members

Name	Address	Date of Birth	Sex	Date Joined Fund	Date Left Fund
Michael Ross	C/- Trevor Wise & Co. PO Box 860 Bondi Junction NSW 2022	30/06/1950	M	25-2-20y	
Jason Ross	C/- Trevor Wise & Co. PO Box 860 Bondi Junction NSW 2022	03/09/1977	M	15-2 2007	
Ann Ross	C/- Trevor Wise & Co PO Box 860 Bondi Junction NSW 2022	31/08/1956	F	25 2.7007	

Nomination for Membership to the Exponential Nominees Superannuation Fund

The Principal, Michael Ross, as identified in Schedule B of the Trust Deed of the Exponential Nominees Superannuation Fund (the "Fund"), herein nominates the following person(s) for membership to the Fund under Category A of Appendix 2, in accordance with Rule 3.1 of the deed.

Persons Nominated for Membership

Michael Ross Jason Ross Ann Ross

Dated this

25 day of

2

2007

SIGNED by Michael Ross,

PRINCIPAL of the

Male X	Female		Date of Birth	30/06/1950
Address for Correspondence				
C/- Trevor Wise & Co., PO B	Box 860			
Bondi Junction NSW 2022	2			
Home Address (If different from 11 Wallis Parade	m above)			
North Bondi NSW 2026				
Telephone		Facs	imile	
Phone (02) 9130 3420		Fax		
Personal Tax File Number	1 5	0 1 6	0 7 5	2
 You may pay more tax on your so income tax assessment); and It may be more difficult to find you multiple superannuation account I understand that under the terms my dependants or, if in the opinio 	our superannuation	n benefit if you change	address without notifying	ng your fund or to amalgamate an
would like the Trustee to know that the proportions indicated.	at if it were my de	ecision, I would prefe	er to distribute my be	nefit to the following persons
Person's full name	<u>Add</u>	<u>lress</u>		Relationship %
Michael		4		1000
Ann Ross	11 W	allis Pade 1	Bonh'	Wife
				J
Declaration				
I accept the Trustee of the Fu	und will protect n	ny interests in the Fu	nd in accordance wi	th the terms of the Trust Deed
I agree to be bound by the Tr	rust Deed (as an	nended from time to	time);	
I accept there are no guarant	cees to the amou	unt of benefit to which	n I shall be entitled;	
I declare that I am eligible to	become a memi	ber of the Fund;		
I declare that I am eligible toI acknowledge that the benef			ot binding on the Tru	ıstee;
_	iciary details nor	minated herein are n	_	ustee;

In accordance with Rule 3.2 of the Trust Deed, I, Ann Ro Trustee of the above named superannuation fund ("the F		
Male Female X	Date of Birth	31/08/1956
Address for Correspondence		
C/- Trevor Wise & Co, PO Box 860		
Bondi Junction NSW 2022		
Home Address (If different from above)		
11 Wallis Parade		
North Bondi NSW 2026		
Telephone	Facsimile	
Phone	Fax	
Personal Tax File Number 1 7 2 0	6 5 8	1 8
You are not required to provide your tax file number. Declining to quote your superannuation fund your tax file number, either now or later: You may pay more tax on your superannuation benefits than you had income tax assessment); and It may be more difficult to find your superannuation benefit if you comultiple superannuation accounts.	ave to (you will get this back at	the end of the financial year in your
I understand that under the terms of the Trust Deed, my benefit i my dependants or, if in the opinion of the Trustee there are no swould like the Trustee to know that if it were my decision, I woul the proportions indicated.	such Dependants, then my	personal legal representative. I
Person's full name Address		Relationship %
Michael Rost 11 Wallis ppt n	soth Boudi	Husband In
Declaration		
I accept the Trustee of the Fund will protect my interests in	the Fund in accordance w	ith the terms of the Trust Deed;
I agree to be bound by the Trust Deed (as amended from ti	ime to time);	
I accept there are no guarantees to the amount of benefit to	o which I shall be entitled;	
I declare that I am eligible to become a member of the Fun	d;	
I acknowledge that the beneficiary details nominated herein	_	ustee;
I hereby declare that the contents of this Application are true	ie and accurate.	
Members Signature:		Date:) / / / /

In accordance with Rule 3.2 of the Trust Deed, I, Jason Ros Trustee of the above named superannuation fund ("the Fun	
Male X Female	Date of Birth 03/09/1977
Address for Correspondence	
C/- Trevor Wise & Co., PO Box 860	
Bondi Junction NSW 2022	
Home Address (If different from above) 11 Wallis Parade	
North Bondi NSW 2026	
Telephone	acsimile
	ax
Personal Tax File Number 1 9 3 6	1 0 5 3 7
You are not required to provide your tax file number. Declining to quote you your superannuation fund your tax file number, either now or later: You may pay more tax on your superannuation benefits than you have income tax assessment); and It may be more difficult to find your superannuation benefit if you cha multiple superannuation accounts.	to (you will get this back at the end of the financial year in your
I understand that under the terms of the Trust Deed, my benefit in t my dependants or, if in the opinion of the Trustee there are no suc would like the Trustee to know that if it were my decision, I would put the proportions indicated.	ch Dependents, then my personal legal representative.
Person's full name Address	Relationship %
ANNABOLLO	811 TON
Declaration	
 I accept the Trustee of the Fund will protect my interests in the 	e Fund in accordance with the terms of the Trust Deed;
 I agree to be bound by the Trust Deed (as amended from time 	e to time);
I accept there are no guarantees to the amount of benefit to w	hich I shall be entitled;
I declare that I am eligible to become a member of the Fund;	
I acknowledge that the beneficiary details nominated herein a	re not binding on the Trustee;
I hereby declare that the contents of this Application are true a	and accurate.
Members Signature:	Date: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \